ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS ST., SUITE 4600, PHOENIX, ARIZONA 85007 PHONE (602) 364-1 PET (1738) FAX (602) 364-1039 VETBOARD, AZ, GOV

0/14/2

COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

	FOR OFFICE USE ONLY							
	Date Received: March 16, 201 Case Number: 21-105							
A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING: Name of Veterinarian/CVT: DR. WENDY PATTERSON/DVM Premise Name: HORIZON ANIMAL HOSPITAL								
	Premise Address: 14150 N 100TH ST SUITE 105							
	City: SCOTTSDALE State: AZ Zip Code: 85260 Telephone: (480) 614-9500							
В.	INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*: Name: GRACE GILL							
	Address:							
	City: Zip Code:							
	Home Telephone: Cell Telephone:							

*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU. SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

C	PATIENT INFORMATION Name: GIGI	ON (1):	
	Breed/Species: PAP	ILLON/DOG	
			Color: TRI COLOR
	PATIENT INFORMATIO	* -	
	Agel	Sex:	Color:
D.	Please provide the n	ame, address and pho	TO THIS PET FOR THIS ISSUE: one number for each veterinarian. TE 105, SCOTTSDALE AZ 85260
	1.0		
Ε.	direct knowledge reg EMILIO BUONO	ame, address and pho	ne number of each witness that has
	Attestation	of Person Reque	sting Investigation
an an	d accurate to the be	st of my knowledge ecords or informat	rmation contained herein is true Further, I authorize the release of ion necessary to complete the
	Signature:	Mace,	
	Date:	3.15	21

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

On 9/14/2020, Dr. Wendy Patterson performed surgery to repair a ruptured anal gland on my little Papillon, GiGi. I picked her up late in the afternoon and gave her the prescribed Metacam pain medication as directed. On 9/16/2020 her pain had escalated to an alarming level; she was in excruciating pain, literally screaming every 15 to 30 minutes all day and all night. GiGi has never had any pain in her entire life! I phoned the clinic on 9/16/2020 and spoke with Emily. I asked for stronger pain medication and described her symptoms, stating that the Metacam was being given as directed and that my attempts to soothe her were unsuccessful. No concern was expressed by Emily, she merely said, "Dr. Patterson is not in today; she will be in tomorrow. I will send her a message and she will phone you tomorrow." I asked her to mark it as Urgent. On 9/17/2020, Dr. Patterson phoned saying she had been "overwhelmed" with work. Dr. Patterson never asked about GiGi's pain, nor did she acknowledge that I had asked for pain medication. Again, I asked for pain medication for GiGi. Dr. Patterson ignored my request, again, refusing medication.

What did the message that Emily sent say?

What information was given to Dr. Patterson that prompted her to refuse pain medication on 9/17/2020 and to decide I was unable to caré for GiGi which resulted in her choosing someone else to manage GiGi's pain rather than giving me pain medication so that I could manage her pain?

Additional Information:

This is my second attempt to resolve this issue to have GiGi returned to me. The first attempt remains unresolved. This complaint provides information showing that refusal to provide pain medication to me resulted in Dr. Patterson choosing someone else to manage GiGi's pain. There was no need for someone else to manage GiGi's pain. GiGi is my Emotional Support Dog.

21-105 New INFO

ALLEGATIONS and/or **CONCERNS—A BRIEF SUMMARY**

Please provide all information that you feel is relevant to the complaint. This portion must be either typed or clearly printed in ink.

Case File 21-105 Re Wendy Patterson DVM

On Monday 9/14/2020 Dr. Wendy Patterson and I had a conversation about the anal gland surgery that Dr. Patterson had just performed. She said, "I know how much you love GiGi and I know how much she means to you and that you are committed to providing the best healthcare for her." We also agreed upon a treatment plan, scheduling a spaying for 3 weeks out.

On Thursday 9/17/20 Dr. Patterson was refusing, and even ignoring, my repeated requests for pain relief options.

What happened? How did I suddenly become "invisible"?

I would like to note that I phoned one of Dr. Patterson's colleagues to ask if Dr. Patterson had consulted her about GiGi's adoption. The answer was, "Yes, she did. Dr. Patterson told me that you are unable to care for GiGi financially and physically and that your health issues also interfere with your ability to care for GiGi. It can be very expensive to hire someone to help you. Therefore, Dr. Patterson felt it was in GiGi's best interest to be adopted." (There is also a false statement made by Dr. Patterson that I want to euthanize GiGi.)

The statements listed above, all of them, are false. None of that information is true. I am not the source of that false information.

Did the false information influence Dr. Patterson's decision to withhold pain relief options? A reasonable expectation regarding an appropriate response from a CVM who had just performed anal gland surgery, (and her patient was having post-surgical pain), would be, "Please bring GiGi in for a physical exam!" And even alarm that her patient was having pain! I would like to know why pain relief options were not offered to me.

I am the only person who can speak for GiGi. She is the innocent victim in all of this. How difficult this must be for her.

If anything can be done to prevent this from happening in the future, GiGi and I would greatly appreciate it. I know that GiGi would still be with me if I had been given pain management options.

Thank you for your time.

Sincerely, Grace Gill

M Gmail

Tracy Riendeau <tracy.riendeau@vetboard.az.gov>

Complaint 1 message

Gill, Grace
To: Tracy Riendeau tracy.riendeau@velboard.az.gov
Co: "Gill, Grace"

21-105

Mon, Mar 22, 2021 at 6:38 PM

Dear Tracy,

Thank you so much for reaching out to me today. This issue is highly emotional because it is about a sacred emotional bond between a pet and the pet owner that is unique to all other relationships. This issue is also extremely complicated, confusing and was a tragic misunderstanding. The result is that beloved little Papillon, GiGi, the most important person in my life, is no longer with me.

The important question, and the only question, is why was I denied a new prescription for stronger pain medication for GIG? To me, it should be that simple.

I will do my best to show that if GiGi had been given a new prescription for stronger pain medication to replace the Metacam that was originally prescribed, GiGi would still be with me today.

I know that Emily (ER) is not a CVT which means that she will not be asked about my conversation with her on 9/16/20. That is why I included her note to Dr. Patterson, showing that Emily (ER) states that "O (owner) is thinking of putting GiGi down.........O feels her own health issues will interfere with GiGi getting the care she needs......O was very upset and I could not understand her when she was crying.....GiGi also seems to be in a lot of pain."

Gigi (24338-1)

Grace Gill (24338)

Canine PAPILLON 5 Yrs. 4 Mos. Female 8.1 pounds (9/14/2020)

Date: 9/16/2020 09:52

Initials: ER

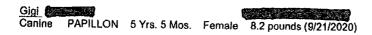
Phone Number:

Message: O called wanting to speak to you about Gigl and also her situation. O is thinking about putting Gigl down. O feels her own health issues will interfere with Gigl getting the care she needs. O was very upset and i could not understand her when she was crying. Gigl also seems to be in a lot of pain. I told O about the Metacam and she acted like she did not know what it was and said she didnt give it at all. Then later in the conversation she is when she gave it 1 time didnt work. Please call o back and discuss what this.

The first, and in my opinion, the only question for Dr. Patterson should be, "Did you prescribe a new pain medication as requested on 9/17/20?" I also believe that it is reasonable for me to request a new pain medication, and that I can expect to have it provided immediately! That was the only request that she was asked to fulfill. Had a new, stronger pain medication been provided, GiGi would still be with me, because that was the ONLY issue! As I understand it, pain management is a high priority with all DVM's. And Dr. Patterson did not verify the information in Emily's note by asking me if it were true.

The note from Jennifer Ray (below) has nearly the same information that is in Emily's note! Please see that her note was added on 9/22/20, 6 days after the event. In regard to her statement that GiGi is "too much to handle" is not at all true! After 5 ½ years together we have a special language and we understand each other perfectly; we are "joined at the hip", as the saying goes! And yes, she does have a unique personality and it is the best personality, I think of all of my dogs! She has an amazing sense of humor and she makes people laugh out loud! She always brightens my day! So all of this erroneous information is so confusing!

5.16 ... 16 ...



Date: 9/22/2020 10:26

Initials: JR Phone Number:

Message: I assisted in helping Grace Gill with the paperwork needed to relinquish Gigi to Horizon Animal Hospital. During this process she mentioned she has her own health issues, Gigi is too much for her to handle (she has never had a dog quite like her with her personality) and she just cant afford to take care of her. Grace Gill was clearly upset about having to make this discission and said it will be best for Gigi. I agreed due to the circumstances she has explained to me. I told her she will be well taken care of and will be in good hands. Owner thanked us and was very appreciative of our help.

9/22/2020 HAH Client Communications: - relinquish interaction JR

Ray, Jennifer - Final - 9/22/2020

And now a little bit about me. At the risk of sounding pathetic, I am in my 70's and I am prone to panic attacks when I have high levels of stress and GiGi's pain was extremely stressfull. I found it confusing to talk over the phone with someone I do not know and who does not know me or GiG. I was quite literally in shock from experiencing GiGi's pain, especially because in all of her life from 4 months to 5 ½ years she had been with me, she never had any pain at all, let alone extreme pain! When Dr. Patterson phoned at about 2:00 PM on 9/17/20 she said she had been "overwhelmed" with work. She did not ask about GiGi's pain and did not even acknowledge that I had asked for a different pain medication. I asked her then for a new pain medication. She actually ignored me! I continued by saving that I thought she might be getting better but that I was terrified that she would have another bad night, and asked for a new stronger pain, just in case. She replied by saying, "She has a 'treatable condition'." I agreed by saying, "And I can treat that condition if you give me a stronger pain medication." Her response was, "We can find someone who will be responsible for her pain." Again, I said, "I can be responsible for her pain!" Then I started crying and she said, "That would be a way to relieve GiGi's pain. And it would be a relief for you. Well, I mean, you wouldn't need to worry about her pain anymore." Why did Dr. Patterson say that? Pain Medication relieves pain, adoption does not relieve pain! Nothing made sense; all I heard was that GiGi's pain would be relieved! I panicked, believing I needed to do that and the rest of it was done based on that belief. I looked at it a few days later and could not believe that I could have done that! There is plenty of evidence showing that I made a serious mistake and that I was confused! I don't know what else to say! I was frantic then and I am frantic now. Please will someone imagine how GiGi feels? After spending her entire life with me she thinks I abandoned her and does not know why! Trust me, she is a Papillon and she has a genius memory. She has always been able to calm me down when I have a panic attack by sitting in my lap, looking in my eyes, asking me to pet her and then giving me kisses!

I appreciate that have given me the opportunity to express my concerns! Sincerely, Grace

Proprietar

Forwarded message
From: Rhonda Condo
To: "Gill, Grace"
Cc: "Michael F. Beethe"
Bcc:
Date: Wed, 17 Mar 2021 16:21:18 +0000
Subject: [EXTERNAL] Grace Gill Request for File

** External Email - Use Caution ***

Dear Grace,

I apologize that I was unable to get the file to you earlier day but I had an unexpected medical issue. Please find attached a copy of your file. If you have any questions, please feel free to let me know. Thank you.

Rhonda H. Condo

Paralegal/Legal Assistant to Michael F. Beethe and

Patrick T. Stanley

Comitz | Beethe

Scottsdale Spectrum

6720 N. Scottsdale Road, Suite 150

Scottsdale, AZ 85253

Direct: 480.219.5315
Fax: 480.219.5599

rcondo@cobelaw.com

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From: Crisann Campbell < crisann.campbell@zurichna.com>
To: "Michael F. Beethe" < MBeethe@cobelaw.com>
Cc:
Bcc:
Date: Thu, 22 Oct 2020 13:43:08 +0000
Subject: 9410673339 Gill vs Wendy J. Patterson, DVM

Thank you for discussing this case with us earlier this week. We do not have an actual adoption date for you. Once your client signed the dog over to Dr. Patterson, the dog was turned over to an adoption coordinator who quickly found a home for the dog. Our insured can only say that after a few days trial, the dog was officially adopted.

As we discussed, your client signed the dog over and gave Dr. Patterson a three page, hand written letter to the new owners stating facts about what Gigi likes and does not like. The signed relinquish form also stated that your client would have no rights to the name of the new owners or any follow-ups about Gigi. Dr. Patterson asked your client to take a day or two to be sure this is what she wanted and her response was "no, I have to do it now". She signed the paper that day.

Unfortunately, your client signing the dog over to Dr. Patterson, gave up any right to the future of that dog who is now in a new home with a family that loves her and will not give her up.



Mr. Beethe,

Crisann Campbell

Professional Liability Claims Specialist

Zurich American Insurance Company

P.O. Box 968041

Schaumburg, IL 60196

Office: (973) 394-5115 Fax: (866) 255-2962

Email: crisann.campbell@zurlchna.com

zurichna.com



Confidential \ Personal Data

Dear Michael:

************	DI	EASE	NOTE	************	
********	ы	-ASE	NO1E	1102441000000000000	

This message, along with any attachments, is for the designated recipient(s) only and may contain privileged, proprietary, or otherwise confidential information. If this message has reached you in error, kindly destroy it without review and notify the sender immediately. Any other use of such misdirected e-mail by you is prohibited. Where allowed by local law, electronic communications with Zurich and its affiliates, including e-mail and instant messaging (including content), may be scanned for the purposes of information security and assessment of internal compliance with company policy.

------- Forwarded message -------From: "Patterson, Michael" <mpatterson@spencerfane.com> To: "Michael F. Beethe" <MBeethe@cobelaw.com> Cc: Bcc: Date: Mon, 19 Oct 2020 18:39:10 +0000 Subject: Horizon Animal Hospital -- Records -- Grace Gill

I have just been notified that an insurance carrier has taken over representation here and will be calling you shortly. From that point forward please direct all communications to the lawyer for the insurer (I do not have that contact information yet but understand they will call you today). If you do not hear back from them, please feel free to reach out to me and I will facilitate a connection for you.

In the interim, the insurer had Horizon instruct me that I am authorized to release the enclosed. Thanks for your patience,

Sincerely,

Mike Patterson

Mike Patterson Attorney at Law Spencer Fane LLP

2415 E. Camelback Road, Suite 600 | Phoenix AZ 85016-4251 O 602-333-5486 M 602-471-5170 mpatterson@spencerfane.com | spencerfane.com

20 attachments

- © 092220 Note from Jennifer Ray.pdf 19K
- 包 20201016_11105454.pdf 3385K
- ☐ 9410673339 35K Gill vs Wendy J. Patterson, DVM.eml
- Agreement to Transfer Pet Ownership.pdf 39K
- Authorization for Medical Records GiGi.pdf 23K
- Beethe -- Horizon -- Patterson.pdf 121K
- Engagement Letter signed on 100120.pdf 202K
- Gigi Photo.pdf 337K
- 包 20201016_11105454.pdf 3385K
- Horizon Animal Hospital -- Records -- Grace Gill.emi
- Ltr Patterson re records 101220 w fax confirmation.pdf 579K
- Medical Records GiGi.pdf 336K
- Notes from Grace re GiGi (3 pages).pdf
- 20 September 2020.docx 13K
- 21 September dialogue.docx
- 041915 Notes.pdf 167K

3/23/2021

- 12 091420 Notes re GIGI and Anal gland.pdf 69K
- 992020 Note to Dr. Patterson re GIGI.pdf
- © 092120 note to Dr. Patterson.pdf 13K
- [EXTERNAL] Grace Gill Request for File.eml 12362K

Subject: [EXTERNAL] Grace Gill Request for File

?

Rhonda Condo < RCondo@cobelaw.com>

Wed, Mar 17, 9:21 AM (6 days ago)

to Gill, Grace, Michael F. Beethe

You are viewing an attached message. State of Arizona Mail can't verify the authenticity of attached messages.

**** External Email - Use Caution ****

Dear Grace,

I apologize that I was unable to get the file to you earlier day but I had an unexpected medical issue. Please find attached a copy of your file. If you have any questions, please feel free to let me know. Thank you.

Rhonda H. Condo

Paralegal/Legal Assistant to Michael F. Beethe and

Patrick T. Stanley

Comitz | Beethe

Scottsdale Spectrum

6720 N. Scottsdale Road, Suite 150

Scottsdale, AZ 85253

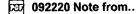
Direct: 480.219.5315 Fax: 480.219.5599 rcondo@cobelaw.com

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18 Attachments









21-105

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

This is additional information regarding my first attempt to resolve this issue. I am concerned that it will not be in GiGi's file. I sent an email to Dr. Patterson on 9/18/20 after GiGi had been adopted asking her to contact me to discuss my concerns about the adoption. Dr. Patterson phoned me a few days later. I explained that the shock of GIGI's excruciating pain was so traumatic and it was such a horrible feeling that I could not comfort her in any way! I also explained that her pain was the sole reason for me to contact the clinic on 9/16/20 and she was not given pain medication at that time. I asked her if she would be willing to contact the new owners to ask if they would consider releasing her back to me. When I said I would be financially responsible for GiGI's care, she asked, "Would you be willing to be just financially responsible or would you also want to have GiGi released back to you?" I said I would like both. She replied by saying "GIGI is living with an elderly couple without any other pets and she is settling in nicely. The new owners were told that you wanted to outhanize GiGi, but I will ask them if they would consider releasing her back to you." I was stunned that they had been told I wanted to euthanize GIGIL I asked her why she thought that! She evaded my question and said, "Well, I will ask them. It will take time to go through the proper channels, but I will keep you in the loop." I waited more than two weeks without hearing back from her. At this time I was extremely uncomfortable talking with her. I asked an attorney to follow up for me. There was a response from the clinic stating that Dr. Patterson had "nothing to do with the adoption" and that she was not personally involved, and yet she gave me the information provided above. Just a few days ago I received GiGi's file from my attorney, Michael Beethe. For the first time, I saw the note that Emily sent to Dr. Patterson, as shown below. This is most likely the source that Dr. Patterson used to determine that I am not able to care for GiGI, financially or physically, and that it was in GiGi's "best interest to be adopted."

As a DVM and the DVM who was treating GiGi, Dr. Patterson was obligated to verify that information before even suggesting adoption!

If Emily could not understand me because I was crying, at best, she was guessing that I said I wanted to "put GiGi down". Dr. Patterson did not ask me if any of the information in the note was true! The note clearly states that I was crying and that Emily "could not understand her (referring to me) when she (referring to me) was crying!" Dr. Patterson also did not respond to the part of the note that states, "GiGi also seems to be in a lot of pain." In fact, during our conversation on 9/17/20, Dr. Patterson did not even acknowledge that I had asked for pain medication, nor did she ask how GiGi was feeling! She was not at all concerned about GiGI! (Please note that Emily sent her note on 9/16/20 at 9:52 AM and Dr. Patterson did not contact me until about 2:00 PM on 9/17/20.) The tragedy is that GiGI was forced to endure excruciating pain because I was not given pain medication! On 9/17/20, I again asked for pain medication and I was literally ignored. I said that I thought GiGi was better but that I still wanted pain medication because I was really worried that she would have another night of excruciating pain. Dr. Patterson said, "She has a 'treatable condition'." I agreed and said that I could treat her pain if I had pain medication. There is a note stating that Dr. Patterson suggested that I think about the option to adopt and that I said, "No, I need to do it now." That contradicts my request for pain medication at the beginning of our conversation which meant I would not have needed to "think about it." GIGI has lived with me since she was four months old! I never said that I could not take care of her and I never said that I wanted to have GiGi adopted. If I had been given pain medication to manage GiGi's pain that would have been the end of it. I felt extreme pressure to accept Dr. Patterson's solution because she would not discuss any other options. GIG is a new patient at Horizon and there is no history for her. For instance, they are unaware that GiGl is my emotional support companion. I have severe panic attacks and as a puppy, she learned to recognize my symptoms and she comes to me and gets in my lap asking me to pet her and then gives me kisses. I am a Senior and I rely heavily on GiGi for emotional support. Respectfully submitted for your review.

Gigi (24338-1) Grace Gill (24338)
Canine PAPILLON 5 Ym. 4 Mos. Female 8.1 pounds (9/14/2020)

Date: 9/16/2020 09:52

Initials: ER

Phone Number:

Message: O called wanting to speak to you about Gigl and also her situation. O is thinking about putting Gigl down. O feets her own health issues will interfere with Gigl getting the care she needs. O was very upset and I could not understand her when she was crying. Gigl also seems to be in a lot of pain. I told O about the Metacam and she acted like she did not know what it was and said she didnit give it at all. Then later in the conversation she is when she gave it 1 time didnit work. Please call o back and discuss what this



RECEIVED

MAR 3 0 2021

Wendy Patterson, DVM 5422 E. Piping Rock Road Scottsdale, AZ 85254

March 25, 2021

Arizona State Veterinary Medical Examining Board Tracy A. Riendeau, CVT 1740 W. Adams Street, Suite 4600 Phoenix, AZ 85007

21-105, In Re: Wendy Patterson, DVM

Ms. Riendeau and Board Members:

Enclosed is a copy of our record for "GiGi" Gill, including Ms. Gill's September 17, 2020 "Agreement to Transfer Pet Ownership". The enclosed records contain the statements of any staff members involved in GiGi's care. Her allegation that the first attempt to resolve this issue remains unresolved is false. See Response to the this Allegation on Page 4.

On September 14, 2020, Grace Gill presented GiGi, a five-year-old female Papillon to Horizon Animal Hospital. This was the first and only time that Ms. Gill presented GiGi to Horizon. We were curbside at that time (and still are), so all communication from me was by phone with her. GiGi was presented for an anal glad rupture. At that the time of presentation, Ms. Gil also provided the enclosed hand-written note (Page 7) stating that GiGi had skin issues, dental issues, possible kidney/liver damage, and had been truly miserable for at least six months.

My examination of GiGi was as documented in the enclosed records. In addition to a painful left anal gland rupture, my examination revealed grade 3 dental disease. GiGi was only painful when we were touching the ruptured anal gland as one would expect. My assessment of GiGi's pain level was 1 out of 4. GiGi was otherwise bright, alert, and responsive.

Due to COVID protocols, after my examination, I called Ms. Gill and discussed my examination findings and recommended addressing the ruptured anal gland in our usual manner with clipping, cleaning, flushing (infusion of antibiotics if possible, which wasn't, in GiGi's case) and antibiotics, NSAID and E-Collar to go home. I had a long conversation with Ms. Gill attempting to address each of her concerns for GiGi and the information that she included on her hand-written note at presentation (Page 7). During this call, Ms. Gill stated several times she preferred natural remedies to medications. She was in tears several times during my call telling me how poorly bred this dog was and the trauma GiGi had endured from the breeder and then traveling from East coast to Arizona in a kennel as a puppy. She also repeated that the dog had been "truly miserable" for months like she had written. I attempted to elicit additional information from Ms. Gill regarding her concerns for GiGi, but she would not clarify what she meant by that statement. In addition to the anal gland rupture and allergies, we also discussed

the need to spay the dog and I explained risk of pyometra in unspayed dogs. I also stated the dog was in need of a dental cleaning as she had significant dental disease. I explained to Ms. Gill that apart from the anal gland rupture, GiGi did not seem to have any other pain that I or any of the staff had noticed during our exam and handling.

During this conversation, Ms. Gill stated several times that she was seriously considering putting GiGi down. I encouraged her to see how GiGi felt after the treatment for the anal gland rupture as most dogs feel significantly better in just a few days in my experience. Ms. Gill approved treatment and approved running blood work. The area was clipped and cleaned and flushed with Chlorhexidine and a small amount of thick brown material was expressed, along with a bit of blood. The right anal gland was also expressed and it was about ¼ full with normal fluid and brown chunks. The blood work was unremarkable. I asked our receptionist to schedule a one week recheck of the anal gland as is my custom and GiGi was sent home with the medications as prescribed (Page 8).

When I returned to work on September 17, 2020 (I was off 9/16/2020), I saw the Client Communication from Emily Rogers (Page 12) I called Ms. Gill back early that afternoon and she was in tears most of the call. She repeatedly said she had health issues of her own which she felt were interfering with her being able to care for the dog. She told me she was ready to put the dog down because she "just couldn't handle this anymore". She even said "I don't have anybody to take the dog when I die." At this point, I offered an option to her of relinquishing GiGi to Horizon and allowing us to find her a new home instead of euthanasia. I told her we have been successful in the past finding homes for dogs, even with some underlying health concerns, and in GiGi's case I felt we could do that if Ms. Gill was interested. I was clear in my discussion with Ms. Gill that ultimately the decision was hers to make. Ms. Gill repeatedly thanked me for doing this. I told her to take her time deciding; it didn't need to be done today. Ms. Gill responded that she wanted to do it right away to "not prolong" this. I told her if she needed more time, just call us. We set an appointment for 4pm for her to come with GiGi and to sign the relinquishment paperwork. I encouraged her to write out some things for a new owner to know about GiGi. She did this — a handwritten three-page list is enclosed. Please note we did not have an owner lined up for GiGi.

When Ms. Gill arrived, one of our staff members, Jennifer Ray (JR), met her outside and reviewed the paperwork relinquishment paperwork (Page 13). Ms. Ray's summary of that interaction is contained in a Client Communication (Page 17). Please also note that Ms. Gill included a three-page letter to given to GiGi's new owner titled "GiGi's quirks" (enclosed, Pages 14-16).

When we got GiGi into the hospital I did a quick check on the anal gland abscess and found it to be significantly healed. At no time during the dog's stay with us after relinquishment did we hear crying, whining or see any exhibition of pain. She received the antibiotic and Metacam as prescribed after relinquishment. Ultimately, a home for GiGi was found within 48 hours of relinquishment. The new owners have had the dog now for six months and have never needed any pain medication for her, have only had to do one Cytopoint injection about a week after they adopted her for allergies, and have also had her spayed and the dental cleaning with multiple extractions taken care of. The dog is apparently thriving.

Over the next several days after relinquishment on September 17, 2020, we received a series of emails from Ms. Gill. (Pages 18-21). Significantly, Ms. Gill's letter dated September 20, 2020 (Page 18) stated that "GiGi was 95% better" at the time she relinquished GiGi. I spoke with Ms. Gill on September 22, 2020. I addressed Ms. Gill's concerns and explained that GiGi was placed in new home and from what I'd heard, GiGi was doing well. My summary of that call is contained in the enclosed records (Page 22).

I take Ms. Gill's complaint to this board very seriously and in addition to the above narrative account, I would like to respond directly to the allegations contained in Ms. Gill's complaint:

Allegation: "On 9/14/2020, Dr. Wendy Patterson performed surgery to repair a ruptured anal gland on my little Paillon, GiGi. I picked her up late in the afternoon and gave her the prescribed Metacam pain medication as directed."

Response: No surgery was performed. We clipped, cleaned, and flushed the ruptured gland. Ms. Gill was never told that surgery was performed or indicated. See SOAP. As for giving prescribed "Metacam pain medication as directed" please see Client Communication on 9/16 from Emily (ER) where she wrote "I told O about the Metacam and she acted like she did not know what it was and said she didn't give it at all. Then later in the conversation she is (said) when she gave it 1 time it didn't work."

Allegation: "On 9/16/2020 her pain had escalated to an alarming level; she was in excruciating pain, literally screaming every 15-30 minutes all day and all night. GiGi has never had any pain in her entire life! I phoned the clinic on 9/16/2020 and spoke with Emily. I asked for stronger pain medication and described her symptoms, stating that the Metacam was being given as directed and that my attempts to soothe her were unsuccessful. No concern was expressed by Emily, she merely said, "Dr. Patterson is not in today; she will be in tomorrow. I will send her a message and she will phone you tomorrow." I asked her to mark it as Urgent."

Response: Again, see Ms. Gill's comments from that conversation about not giving the Metacam as prescribed. In addition, all of our Receptionists will always offer to have another Dr call the owner or review a request for additional or different medication if the Dr someone wants to talk to is not there. This is our policy.

Allegation: "On 9/17/2020, Dr. Patterson phoned again saying she had been "overwhelmed" with work."

Response: I categorically deny using the word "overwhelmed." I have never used the word "overwhelmed" when talking with clients. I am very aware this would give them a sense we are not thorough or careful with their pet. Plus, I've never actually felt overwhelmed even with our busy schedule! By contrast, Ms. Gill used that term numerous times with me and with our staff.

Allegation: 'Dr. Patterson never asked about GiGi's pain, nor did she acknowledge that I had asked for pain medication. Again I asked for pain medication for GiGi. Dr. Patterson ignored my request, again, refusing medication.'

Response: This was the conversation I had with Ms. Gill where she said she said she wanted to put GiGi down. We did discuss the dog's pain, but she immediately went to wanting to put her down. This is when I offered relinquishment. Ms. Gill agreed, stating repeatedly how thankful she was that we would do this for her and GiGi. A few hours later when Ms. Gill had signed the papers to relinquish ownership and we had GiGi in the clinic, there was no evidence of pain noted by me or any staff member over the next few hours. GiGi began receiving the prescribed Metacam that evening and any pain she may hae had appeared adequately controlled with that NSAID.

Allegation: "What did the message that Emily sent say? What information was given to Dr. Patterson that prompted her to refuse pain medication on 9/17/2020 and to decide I was unable to care for GiGi which resulted in her choosing someone else to manage GiGi's pain rather than giving me pain medication so I could manage her pain?"

Response: Emily's message is contained in the enclosed Client Communication record for 9/16. I did not refuse pain medication on 9/17. I did not decide Ms. Gill was unable to care for GiGi. I did not choose to have someone else manage GiGi's pain. I did not have someone lined up to adopt GiGi. Ms. Gill chose to relinquish GiGi as described above.

Allegation: "This is my second attempt to resolve this issue to have GiGi returned to me. The first attempt remains unresolved."

Response: Ms. Gill's first attempt, through an attorney acting on her behalf, was resolved through PLIT with a refusal to return GiGi after it was determined that Ms. Gill had relinquished ownership of GiGi. The new owners had bonded with the dog and were unwilling to return her which, given Ms. Gill's relinquishment, were within their right as legal new owners.

Allegation: "This complaint provides information showing that refusal to provide pain medication to me resulted in Dr. Patterson choosing someone else to manage GiGi's pain."

Response: According to Ms. Gill's own report on 9/16, she did not give the Metacam as prescribed to manage the pain. I did not refuse to give additional pain medications. Because Ms. Gill surrendered GiGi, there was no need to prescribe something like Buprenorphine or Gabapentin. And, when brought back to Horizon we did not see anything in dog's behavior or manners that indicated additional pain meds were needed.

Allegation: "GiGi is my Emotional Support Dog"

Response: Ms. Gill never once stated that GiGi was an Emotional Support Dog nor did she provide any documentation of this.

Respectfully, Wendy Patterson DM

Wendy Patterson, DVM

DOUGLAS A. DUCEY GOVERNOR



VICTORIA WHITMORE - EXECUTIVE DIRECTOR -

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

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INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: PM Investigative Committee: Adam Almaraz - Chair

Amrit Rai, DVM

Cameron Dow, DVM

Brian Sidaway, DVM - Recused

STAFF PRESENT: Tracy A. Riendeau, CVT – Investigations

Marc Harris, Assistant Attorney General

RE: Case: 21-105

Complainant(s): Grace Gill

Respondent(s): Wendy Patterson, DVM (License: 4625)

SUMMARY:

Complaint Received at Board Office: 3/16/21

Committee Discussion: 8/3/21

Board IIR: 9/15/21

APPLICABLE STATUTES AND RULES:

Laws as Amended August 2018 (Lime Green); Rules as Revised

September 2013 (Yellow)

On September 14, 2020, "GiGi," a 5.5-year-old female Papillon was presented to Respondent for exam due to an anal gland issue. The dog was examined; the ruptured left anal gland was treated, and the dog was discharged with antibiotics and meloxicam.

On September 16, 2020, Complainant called with concerns she could not care for the dog and was considering euthanasia.

On September 17, 2020, Respondent spoke with Complainant about her concerns of the inability to care for the dog. She was considering euthanasia, therefore Respondent offered her the option of relinquishing the dog and allowing them to find a new home for the dog. Respondent told Complainant to take her time in deciding but Complainant wanted to bring the dog in that day.

Later that day, Complainant brought the dog to the premises, completed the relinquishment paperwork, and turned the dog over with a hand-written note about the dog for the new owner.

Complainant was noticed and appeared telephonically.

Respondent was noticed and appeared telephonically. Attorney, David Stoll appeared.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: Grace Gill
- Respondent(s) narrative/medical record: Wendy Patterson, DVM

PROPOSED 'FINDINGS of FACT':

- 1. On September 14, 2020, the dog was presented to Respondent for an exam due to anal gland issues. Curbside services were being offered at that time. Complainant had provided a note stating the dog had skin issues, dental issues, possible kidney/liver damage, and claiming the dog had been miserable for the past 6-months. The dog had ruptured the left anal gland the previous day. The dog was not spayed and licks and chews at her paws constantly. Complainant prefers to use naturopathic remedies but they were not helping.
- 2. Respondent examined the dog and found a ruptured left anal gland that was painful to the touch, and a grade 3 dental disease. She called Complainant with her findings and recommended addressing the ruptured anal gland by clipping, cleaning, and flushing; the dog would be sent home with antibiotics, an NSAID, and Elizabethan collar. Respondent discussed at length each of the concerns Complainant listed on her note at presentation. They also discussed the need to spay the dog; Respondent explained there was a risk of pyometra in unspayed dogs. She further advised that the dog needed a dental cleaning, and other that the anal gland rupture, the dog did not seem to have any other pain.
- 3. During the conversation, Complainant stated several times that she was considering putting the dog down. Respondent encouraged Complainant to see how the dog felt after the treatment for the anal gland rupture, as she should feel better in a few days. Blood work was performed nothing significant was noted. Respondent clipped and cleaned the anal gland rupture, it was flushed and a small amount of thick brown material with blood was expressed. The right anal gland was also expressed normal material was noted. The dog was discharged with Clavamox drops and metacam suspension. Discharge instructions included a recommendation to recheck the dog in one week.
- 4. On September 16, 2020, Complainant called and spoke to Respondent's staff about possibly putting the dog down. She felt her own health issues would interfere with the dog getting the care she needed. Due to Complainant's crying, staff had a difficult time understanding her. Complainant was concerned the dog was in pain, but when asked about the meloxicam, it was not clear if Complainant was giving the medication as prescribed.
- 5. According to Complainant, she called Respondent's premises reporting the dog was in

excruciating pain – screaming every 15 – 30 minutes, all day and night. Complainant requested stronger pain medication and the metacam was being given as directed without successfully managing the dog's pain. No concern was expressed and was told that Respondent would call her the following day.

- 6. On September 17, 2020, Respondent spoke with Complainant. Complainant repeatedly stated that she had her own health issues which she felt were interfering with her being able to care for the dog. Complainant was ready to put the dog down as she could not handle it anymore and had no one to take care of the dog when she died. Respondent offered the option of relinquishing the dog to the premises and allowing them to find the dog a new home instead of euthanasia. Complainant was appreciative of the option and repeatedly thanked Respondent.
- 7. Respondent told Complainant to take her time deciding as the relinquishment did not need to be done that day. Complainant did not want to prolong the matter and wanted to do it right away. An appointment was made for Complainant to drop the dog off at 4:00pm however, if she needed more time to decide, she was to call. Respondent encouraged Complainant to write down a few things about the dog for the new owner.
- 8. Later that day, Complainant brought the dog to Respondent's premises, completed and signed the relinquishment paperwork and turned the dog over with a three page handwritten letter about the dog.
- 9. Once inside, Respondent evaluated the dog and found the anal gland abscess to be significantly healed. At no time did Respondent or staff hear the dog cry, or exhibit signs of pain. The dog was given the medication as prescribed. Within 48 hours, a new home was found for the dog.
- 10. On September 20, 2020, Complainant reached out to Respondent stating she felt pressured to complete the relinquishment paperwork and had different expectations on how it would be handled. In another note dated September 21st, Complainant stated that she understood that she was responsible for her actions and had made a mistake.
- 11. According to Complainant, Respondent refused to provide her with a different pain medication which resulted in Respondent choosing someone else to manage the dog's pain. Respondent responded that Complainant was not giving the dog the metacam as prescribed to manage the dog's pain. She did not refuse additional pain medications Complainant elected to relinquish the dog therefore there was no need to prescribe something else. When the dog was brought to the premises, there was no indication the dog needed additional pain medication.
- 12. Respondent explained that Complainant attempted to resolve the matter through an attorney acting on her behalf to have the dog returned to her. It was resolved with a refusal

to return the dog after it was determined that Complainant had relinquished ownership of the dog. The new owners had bonded with the dog and were unwilling to return her, which was within their right.

COMMITTEE DISCUSSION:

The Committee discussed that they understood how Complainant can be upset as she no longer has her canine companion. However, Respondent and her staff were clear about the relinquishment requirements and encouraged Complainant to take her time in deciding if that was what she wanted to do.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that no violations of the Veterinary Practice Act occurred.

COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board:

Dismiss this issue with no violation.

Vote: The motion was approved with a vote of 3 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.



Tracy A. Riendeau, CVT Investigative Division